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PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								Application or Docket Number NO 718293 CA920030013051						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN		
TOTAL CLAIMS			31					RATE		FEE	1	RATE	FEE	
FOR			NUMBER FILED .		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		- 11			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			テ minus 3 =		* 4			X43=			OR	X86=		
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT		·			+145=			OR	+290=		
* i f	the difference	in column 1 is	less than ze	ero, enter	"0" in ()" in column 2			TOTAL		OR	TOTAL		
	C	(Column 1)	MENDEC	MENDED - PART II (Column 2) (Co				SMALL ENTITY			OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.31	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	- 7	Minus	87F-8		=		X43=			OR	X86=		
	FIRST PRESE	NTATION OF MU	JETIPLE DEI	PENDENT	CLAIM ,			+145=			OR	+290=		
							L	TOTA	¥L		OP.	TOTAL		
(Column 1) (Column 2) (Column 3)									E L	·	J • • • • •	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	<u>.</u>	HIGHE NUME PREVIO PAID F	ST BER JUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		Ξ		X\$ 9=	-		OR	X\$18=		
	Independent	*	Minus	***	01 4114	=		X43=	1		OR	X86=		
L	FIRST PRESE	NTATION OF MU	CTIPLE DEP	ENDEN	CLAIM	<u>. U </u>	ľ	+145=	T		OR	+290=		
							L	TOTA			OR,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	-	DOM. F C	_		•	ODIT. FEEL		
£ .		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=	†		OR	X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		t	+145=	†			:		
- 11	* If the entry in column 1 is less than the entry in column 2, write *0* in column 3.										OR	+290= TOTAL		
	the "Highest Nur	nber Previously Pai mber Previously Pa ber Previously Paid	id For IN THIS	S SPACE is	less that	n 3, enter "3."		TOTAL DDIT. FEE d in the	L			DDIT. FEE		